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ABSTRACT

During the 1995-96 school year, the Colorado Department of Education supported Comprehensive Health Education Programs as authorized by the Comprehensive Health Education Act of 1990. This report summarizes the projects funded under that grant along with additional observations and recommendations regarding the operation of such grants. Grant funds were made available to 15 school districts and 33 schools. Twelve Carnegie Middle Schools received $3,000 each to help meet health and fitness goals. A total of 10 implementation grants for $15,000 and one for $13,725 were awarded. They addressed such areas as staff wellness, peer training, health screening, evaluation, character education, and staff/community/parent training. Four alternative schools received $500 each to help with tobacco prevention and cessation programs. Three planning grants of $7,000 each were awarded to help with curriculum development, establishment of an advisory council, and program evaluation. Two building-level projects of approximately $5,000 each to deal with such issues as pregnancy/AIDS prevention, support for teen mothers, staff training, curriculum improvement, and dental screening. The major demonstration grant for $30,000 went to help one school district in areas such as assessing current comprehensive health programs, promoting staff and community development around health issues and supporting student activities that promote healthy lifestyles. (SM)

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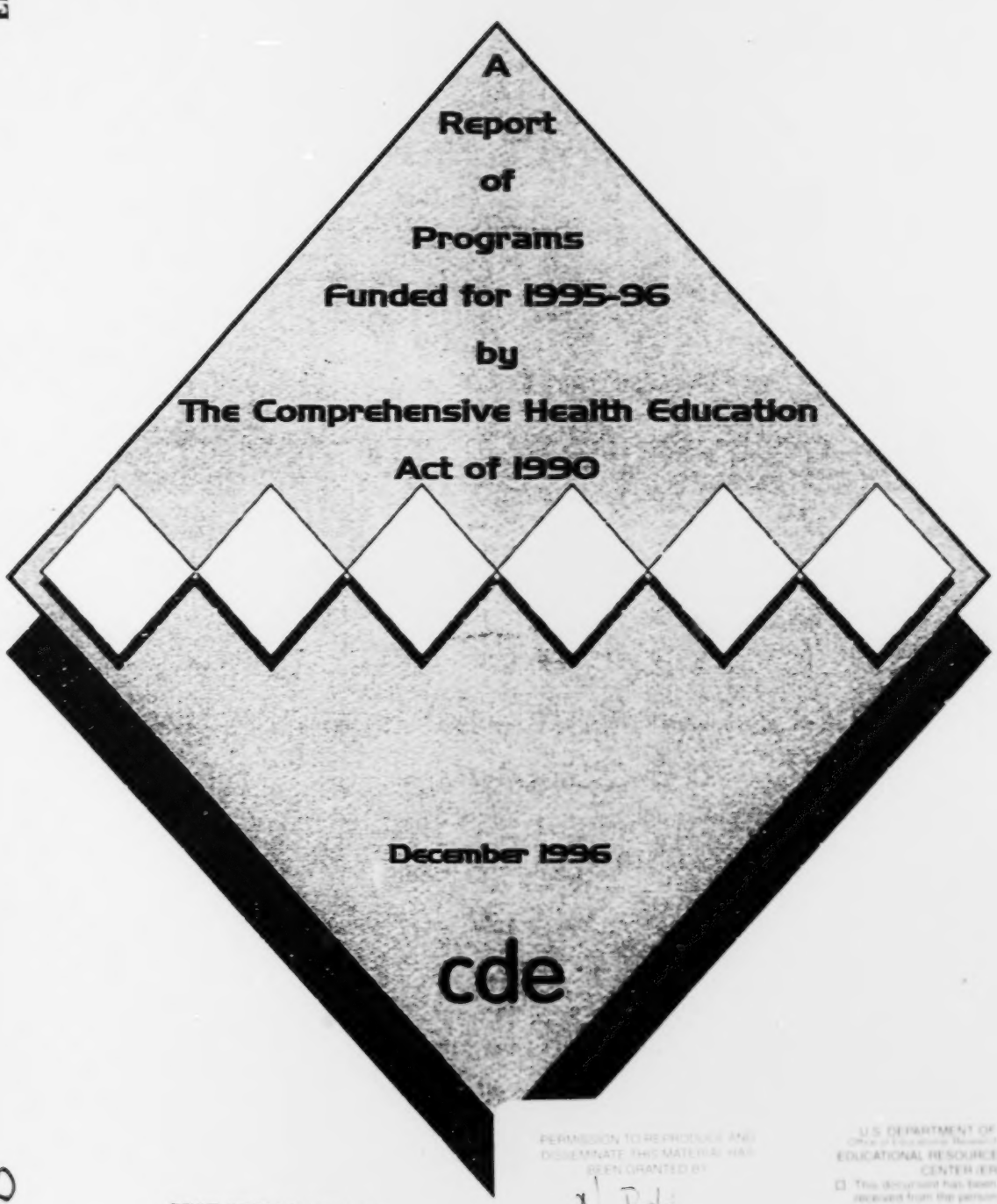

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Progress and Impact

A Report of Programs Funded For 1995-96

By

The Comprehensive Health Education Act of 1990

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INTRODUCTION

The Comprehensive Health Education Act of 1990 declared that the purpose of the Act was to "foster healthy behaviors in our children and communities through a comprehensive education plan which has as it goal not only the increase of health knowledge but also the modification of high-risk behaviors". After the original Act was passed a second goal was identified as follows: "the implementation of educational programs in the public schools....to assist young people in avoiding gang involvement and substance abuse."

During the 1995-96 school year the Colorado Department of Education supported Comprehensive Health Education Programs as authorized by the Comprehensive Health Education Act of 1990. This document is a summary of the projects funded under that grant along with additional observations and recommendations regarding the operation of such grants. Grant funds were made available to 15 school districts and 33 schools as follows:

CARNEGIE MIDDLE SCHOOLS

(Each of twelve schools received $3000 to assist in meeting "Health and Fitness" goals)

District	School
Adams County School District 1	John Dewey Junior High School
Adams County School District 1	York Junior High School
Adams County School District 14	Adams City Middle School
Adams County School District 27J	Overland Trail Middle School
Arapahoe County School District 28J	West Middle School
Denver County School District 1	Gove Middle School
Jefferson County School District R-1	Wheat Ridge Middle School
Mesa County School District 51	East Middle School
Montezuma County School District RE-1	Cortez Middle School
Pueblo County School District 60	Risley Middle School
Rio Grande County School District C-8	Monte Vista Middle School
Weld County School District RE-8	Fort Lupton Intermediate School

IMPLEMENTATION GRANTS

(Ten grants of $15,000 each; one grant for $13,725)

Arapahoe County School District 5
El Paso County School District 3
La Plata County 9-R School District
Pueblo County School District 60
Routt County School District RE-1
Douglas County School District RE1
Grand County School District 2
Mesa County School District 51
Rio Grande County School District C-8
Summit County School District RE-1
Weld County School District Re-3(J)

ALTERNATIVE SCHOOLS

(Four schools each received $500 grants to assist with tobacco prevention and cessation programs)

District	School
Adams County School District 14	Lester Arnold High School
Adams County School District 50	The Alternative Center for Education
Larimer County School District R-1	Centennial High School
Larimer County School District R-2(J)	Harold Ferguson High School

PLANNING GRANTS

(Three grants of $7000 each)

District	School
Boulder County School District 1J	St. Vrain Valley School District RE-1J
Conejos County School District RE-10	Antonito High School
El Paso County	Colorado School for the Deaf and the Blind

BUILDING LEVEL PROJECTS

District	School
El Paso County School District 11	Washington Irving Junior High ($4980)
Denver County School District 1	Valdez Elementary - Montbello ($5000)

DEMONSTRATION

(One grant for $30,000)

Garfield County School District RE-1

CARNEGIE MIDDLE SCHOOL PROJECTS

These schools were middle level schools which received $3000 grants to assist with implementing health and fitness goals.

GOALS

Schools often reported goals that were multifaceted. In order to determine the emphasis at each school and in order to facilitate reporting, goals were grouped by broad, general categories. Schools reported goals as follows:

Goal Area	Number of Schools
☛ Curriculum Development/Improvement	8
☛ Staff Development	5
☛ Staff Wellness Program	3
☛ Reducing risk behaviors/discipline referrals	3
☛ Improvement of academic performance	2
☛ Self esteem, team building, problem solving	2
☛ Decision Making/Healthy choices	2
☛ Assessment/Surveys of health needs	1
☛ Creating/Operating a Wellness Center	1
☛ Student Wellness Program	1

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ACCOMPLISHMENTS

Significant accomplishments reported by the middle schools included:

John Dewey Jr. High School

- ★ Staff training
- ★ Held Health/Fitness Fair
- ★ Smoking Cessation Programs
- ★ Conducted assessments or surveys
- ★ Curriculum implementation/ improvement
- ★ Sponsored community-wide awareness activities
- ★ Involvement of broad-based community advisory committees

York Jr. High School

- ★ Held Health/Fitness Fair
- ★ Conducted assessments or surveys
- ★ Additional health personnel for the school
- ★ Curriculum implementation/ improvement
- ★ Social activities consistent with wellness priority

Adams City Middle School

- ★ Staff training
- ★ Held Health/Fitness Fair
- ★ Curriculum implementation/ improvement
- ★ Wellness emphasis in school cafeteria services
- ★ Social activities consistent with wellness priority

Overland Trail Middle School

- ★ Staff training
- ★ Conducted assessments or surveys
- ★ Building or acquiring fitness equipment
- ★ Curriculum implementation/ improvement
- ★ Implemented programs to improve academic performance of students

West Middle School

- ★ Integration of health themes throughout the curriculum

Gove Middle School

- ★ Staff training
- ★ Wellness emphasis in school cafeteria services
- ★ Involvement of broad-based community advisory committees
- ★ Implemented programs to improve academic performance of students

East Middle School

- ★ Held Health/Fitness Fair

Cortez Middle School

- ★ Staff training
- ★ Involvement of broad-based community advisory committees

Risley Middle School

- ★ Establishment of a Wellness Center where 1277 student visits were recorded; 72% of the parents signed the required Parental Consent Form

Monte Vista Middle School

- ★ Curriculum implementation/ improvement
- ★ Involvement of broad-based community advisory committees

Fort Lupton Intermediate School

- ★ Building or acquiring fitness equipment
- ★ Wellness emphasis in school cafeteria services
- ★ Social activities consistent with wellness priority

EXAMPLES OF IMPACT

- Monte Vista Middle School served approximately 310 students through their health classes and in response to some parent criticism of the 8th grade class obtained more parent and church involvement in the program.
- York Jr. High School involved over 500 students in their Comprehensive Health Education Program.
- Adams City Middle School reported approximately 750 students benefited the Health program in that school.
- John Dewey Jr. High School impacted all students (approximately 400) through direct instruction, involvement in activities, or health screenings.
- Risley Middle School recorded 1277 student visits at the Wellness Center and had 72% of the parents sign consent forms for their students to use the Center.
- Gove Middle School served 136 students in a literacy course that was designed to enable the students to move on to high school; every teacher was trained in the Respect and Protect Program.
- Overland Trail Middle School trained over 300 students in the newly installed climbing wall.

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COLLABORATION

Collaborative efforts were cited throughout the project reports. Examples of the kinds of community links were:

American Cancer Society
American Heart Association
American Lung Association
American Red Cross
Arvada Center
Bonfils Blood Bank
Burger King Academy of the Rockies
Channel 9
Clergy
Colorado State Patrol
Colorado Youth Leadership
Communities in Schools
Community Health Services
Fire Departments
Girls, Inc.
Hall of Life
Health Departments
I-Care Hotline
Kaiser Permanente
Law Enforcement
Local merchants
Local newspapers
Mental Health Center staff
National Jewish Hospital
Paramedics
Parent groups
Parks and Recreation Departments
Parkview Episcopal Medical Center
PAVE
Physicians
Planned Parenthood
Psychologists
Public Service Company
RAPE Awareness Center
School district central administrators
Senior Centers
Spinal Cord - Injury Association
Staff from other schools
University of Colorado at Denver
Western Dairy Council

and hundreds of other individual community members.

IMPLEMENTATION GRANT PROJECTS

GOALS

The goal areas addressed with the Implementation Grants were as follows:

Goal Area	Number of Schools
☛ Development of Advisory Committee	4
☛ Staff /Community/ Parent Training	5
☛ Implementation/Improvement of Instruction	5
☛ Initiate programs addressing key health issues	3
☛ Evaluation	3
☛ Communication/Networking	4
☛ Curriculum/Standards development or revision	3
☛ Enhance/Establish Comprehensive Health Education Program	5
☛ Health Screening	1
☛ Peer Training	1
☛ Provide additional personnel	1
☛ Staff Wellness	1
☛ Character Education Program	1

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ACCOMPLISHMENTS

The projects reported the following as noteworthy accomplishments during the year:

Arapahoe County School District 5

- ★ Training (staff, student, and/or community)
- ★ Worked on K-12 Health Education Standards
- ★ Evaluated and revised their Health Education Curricula

Douglas County School District RE 1

- ★ Additional health personnel were hired
- ★ Training (staff, student, and/or community)
- ★ Worked on K-12 Health Education Standards

El Paso County School District 3

- ★ Training (staff, student, and/or community)

Mesa County School District 51

- ★ Reported a more effective and/or more integrated Advisory Council

La Plata County School District 9-R

- ★ Completed a student health survey
- ★ Training (staff, student, and/or community)
- ★ Evaluated and revised their Health Education Curricula
- ★ Reported a more effective and/or more integrated Advisory Council
- ★ Had extensive community involvement and collaboration in their projects to reduce the incidence of teen pregnancy
- ★ Reported increased community involvement in cooperatively providing healthy activities and alternatives for young people

Rio Grande County School District C-8

- ★ Additional health personnel were hired
- ★ Training (staff, student, and/or community)
- ★ Evaluated and revised their Health Education Curricula

Pueblo County School District 60

- ★ Reported a more effective and/or more integrated Advisory Council
- ★ Had extensive community involvement and collaboration in their projects to reduce the incidence of teen pregnancy
- ★ Reported only six students requested exemption from the Human Sexuality Curriculum and only one exemption from the entire health class

Routt County School District RE-1

- ★ Direct services to students were expanded
- ★ Evaluated and revised their Health Education Curricula
- ★ Worked to further enhance their Comprehensive Health Education Program
- ★ Reported increased community involvement in cooperatively providing healthy activities and alternatives for young people.

Summit County School District RE-1

- ★ Training (staff, student, and/or community)
- ★ Evaluated and revised their Health Education Curricula
- ★ Expanded print and video resources for use by parents
- ★ Reported no requested exemptions from a similar class for the past two years
- ★ Provided students with dental health brochures which a local dentist made available
- ★ Had extensive community involvement and collaboration in their projects to reduce the incidence of teen pregnancy
- ★ Reported increased community involvement in cooperatively providing healthy activities and alternatives for young people

Weld County School District RE-3(J)

- ★ Training (staff, student, and/or community)
- ★ Evaluated and revised their Health Education Curricula.
- ★ Reported a more effective and/or more integrated Advisory Council

EXAMPLES OF IMPACT

- The Youth Risk Behavior Survey used by Douglas County School District RE1 showed a reduction in sexual activity among youth and no increase in smoking (this in contrast to national trends)
- El Paso County School District 3 reported over 50 people trained in Project Alert Curriculum; forty-four facilitators have been trained in SAP (Student Assistance Program); and, thirty-five students and three parents were trained in violence prevention
- Grand County School District 2 distributed their health newsletter, "Healthy Heartbeats," to approximately 1,000 families and community members
- La Plata County School District 9-R reported 2,500 students involved in health programs and with the current completion of the K-12 curriculum guide approximately 4,500 students will receive updated health instruction
- Pueblo County School District 60 involved more than 100 people in their study/focus groups related to the "Children Having Children" project
- Rio Grande County School District C-8 served 700 elementary students, 200 middle school students and 150 high school students through their comprehensive health education program
- Routt County School District RE-1 reported a reduction in infractions related to alcohol, chewing tobacco, and other drugs
- In Summit County School District RE-1 every student received information on dental health; fourteen parents of preschool children participated in a Peaceful Parenting workshop; thirty "at risk" middle school students participated in outdoor experiences and related interventions in Breckenridge; and the Summit county school nurse and Family Planning nurse practitioner report an increase in students who are seeking information and testing with the nurse practitioner

COLLABORATION

Collaborative efforts were reported with the following individuals and organizations:

Breckenridge Outdoor Education Center
Building administrators
Channel 9
Child Find Coordinator
Clergy
Colorado Association of School Boards
Community/business representatives
Community colleges
Counselors
County commissioners
D.A.R.E.
Douglas County Committee on Youth and Families
Family and Consumer Education Extension Office
Grand Futures
Health and Human Services
Health departments
Juvenile Diversion Officer
Law enforcement
Librarians
Mental health centers
Nurses
Parents
Partners for Youth
Physicians/Surgeons
Preschool personnel
Prevention Partners
Private schools
Psychologists and therapists
PTA/PTO
Resources for Youth
Rocky Mountain Training Center
School boards
School district officials and administrators
Southeastern Colorado AHEC
Sports medicine experts
Students
Summit Prevention Alliance
Teachers
Town/city governing boards
Transportation officials
Victim Advocates
Wellness center
Women's Crisis Center

ALTERNATIVE SCHOOLS

GOALS

Alternative Schools reported goaxls in the following areas:

Goal Area	Schools
Education regarding health hazards of smoking	1
Assistance in smoking cessation	2
Provide alternative to suspension for smoking violations	1

ACCOMPLISHMENTS

Reports from the Alternative School Projects indicated the following accomplishments:

★ Harold Ferguson High School established a Smoking Cessation Class as an alternative to suspension for students found using tobacco on school grounds

★ The Alternative Center for Education in Westminster reported that all participants altered their smoking habits as a result of the program--they all reduced the amount they smoked, some markedly. The program received a "Building a Community Without Drugs" award from the Westminster Area Community Awareness Action Team for an outstanding program.

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EXAMPLES OF IMPACT

- Harold Ferguson High School reported that seven students avoided suspension through their program and one student stopped smoking as result of their intervention. The school provided the smoking cessation information to all 176 students.
- The Alternative Center for Education involved twenty students with twelve indicating they stopped smoking until Spring break and two reported no smoking after a two month period. All students reduced their smoking and learned skills for stopping smoking.

COLLABORATION

The alternative school projects reported collaboration with: a church, an accountability committee, the American Lung Association and numerous staff members

PLANNING GRANTS

GOALS

The planning grant projects addressed the following goal areas:

Goal Areas	Schools/Districts
Curriculum Development/Revision	2
Establishment of Advisory Council	1
Program Evaluation	1

ACCOMPLISHMENTS

- St. Vrain Valley School District RE-1J was able to adopt curriculum materials for K-8 program consistent with the Health Education Philosophy adopted by the Board of Education. That philosophy statement guided the district in moving ahead with strong community support.
- The Colorado School for the Deaf and the Blind reported they were able to complete the curriculum revision and order materials necessary for implementation during the next school year. The school has also developed a draft of a policy on Health Education for the school.

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EXAMPLES OF IMPACT

Since these are planning grants the impact is yet to be determined.

COLLABORATION

The planning grant projects indicated collaboration with:

- Board of Education
- Colorado Association of the Deaf
- Community members
- D.A.R.E. staff
- Hospitals
- Law enforcement
- Mental health center
- National Association of the Blind
- Parents
- Representatives from the health community
- School staff
- United States Association for Blind Athletes
- YMCA

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BUILDING LEVEL PROJECTS

GOALS

The building level projects reported goals as follows:

Goal Area	Schools
Expand education and outreach in school health center	1
Pregnancy/AIDS prevention	1
Support for teen mothers	1
Staff training	1
Curriculum improvement	1
Helping students make healthy, informed choices	1
Dental screening and improved dental hygiene	1

ACCOMPLISHMENTS

- ★ Student prevention team from Washington Irving Jr. High School was asked to present a skit at the ALL STARS middle school conference in Colorado Springs.
- ★ Entire Valdez Elementary School celebrated Children's Dental Health Month.
- ★ A bilingual newsletter for parents and teachers was published three times during the year by Valdez Elementary.
- ★ Valdez Elementary School first grade teachers participated in inservice program.
- ★ A new course, "Strengthening Latino Families," was developed at Valdez Elementary for offering during the summer.

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EXAMPLES OF IMPACT

- The Washington Irving Jr. High skit, "The House that Crack Built," was presented to approximately 1,200 students.
- More than 150 people attended the Washington Irving Jr. High parent seminars, a doubling of attendance from the previous year.
- Twenty-five Washington Irving Jr. High School girls attended conference dealing with teen issues, decision making and career choices. A large group of Washington Irving Jr. High students attended the Rocky Mountain Youth to Youth conference and, in turn, influenced many other students to be "drug-free".
- Red Ribbon Week speakers addressed more than 1,000 students with drug-free messages at Washington Irving Jr. High School.
- Every ninth grader at Montbello High School participated in the 9th grade Teen Pregnancy/HIV Prevention Project.
- One hundred fifty children (approximately 98% of the class) received dental screening at Valdez Elementary School and were referred for dental care.

COLLABORATION

Collaborative efforts in the building level projects included:

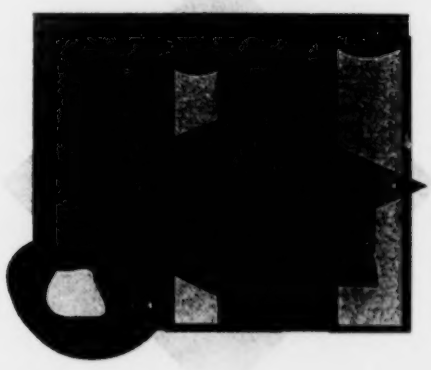
Adult Prevention Team
American Cancer Society
American Lung Association
Apria Health Care
Colorado AIDS Project
Colorado Department of Health - Oral Health Division
Greater NE News
Kaiser Permanente
Law enforcement
Parents
Rocky Mountain News
Rocky Mountain Youth to Youth
School staff
University of Colorado School of Dentistry

DEMONSTRATION PROJECT

One major demonstration grant was made to Roaring Fork School District RE-1 That project reported the following:

GOALS

- Assess current comprehensive health program
- Promote staff and community development around health issues
- Increase coordination between classrooms and attendance centers to assure a strong Pre K-12th grade comprehensive health program
- District policies will promote and support comprehensive health education
- Promote and support student activities that promote healthy lifestyles



ACCOMPLISHMENTS

- ★ A middle school assessment tool was designed to assess programs at Basalt and Glenwood Springs Middle Schools.
- ★ Several community members (teachers, parents, program directors) attended the Colorado School Health Conference and heard Peter Benson's ideas on asset building. These ideas will be used in future work.
- ★ Health resources were purchased for the Basalt Family Resource Center.
- ★ Mini-grant process allowed for integration of health topics into Experimental Science class at Basalt High School and resulted in increased teaming between health and science teachers.
- ★ Supported "Minutes for Reading" and "Minutes for Activity" fitness program for all second graders at Carbondale Elementary School.

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EXAMPLES OF IMPACT

- Basalt High School science students created experiments which showed the potentially lethal effect of nicotine.
- Astronaut Kent Rominger spoke to students about the importance of setting goals.
- Mini-grant program generated interest in health issues among school staff. Seventeen mini-grants were awarded.

COLLABORATION

This Demonstration Project reported collaboration with the following:

Advocate Safe House Project
Basalt Family Resource Center
Coalition for Families
Colorado Preschool Project
Garfield Youth Services
Healthy Mountain Communities
Lasso Tobacco Colorado
Roaring Fork Health Council
The Parent Network
Valley Partnership for Drug Prevention

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OBSERVATIONS AND RECOMMENDATIONS

The title of this report, "Progress and Impact", reflects the commitment and direction of the schools and communities involved in these exciting and forward-looking projects. It is clear that true progress is being made toward the implementation of comprehensive health education programs in many schools. It is also clear that those who designed the projects were very aware of the need to impact the behavior and attitudes of young people.

The preceding section of this document has reported the activities, conclusions, and impressions of the schools and school districts that received grants for the support of Comprehensive School Health programs during the 1995-96 school year. In this section observations and conclusions are drawn about those projects and recommendations for improvement or modification are presented.

NOTE: Some project reports did not address the questions that were set forth in the format provided by CDE. It is imperative that reports be consistent in the data provided and the questions answered. In the future, reports that follow "creative" formats should be asked to complete the standard report in addition.

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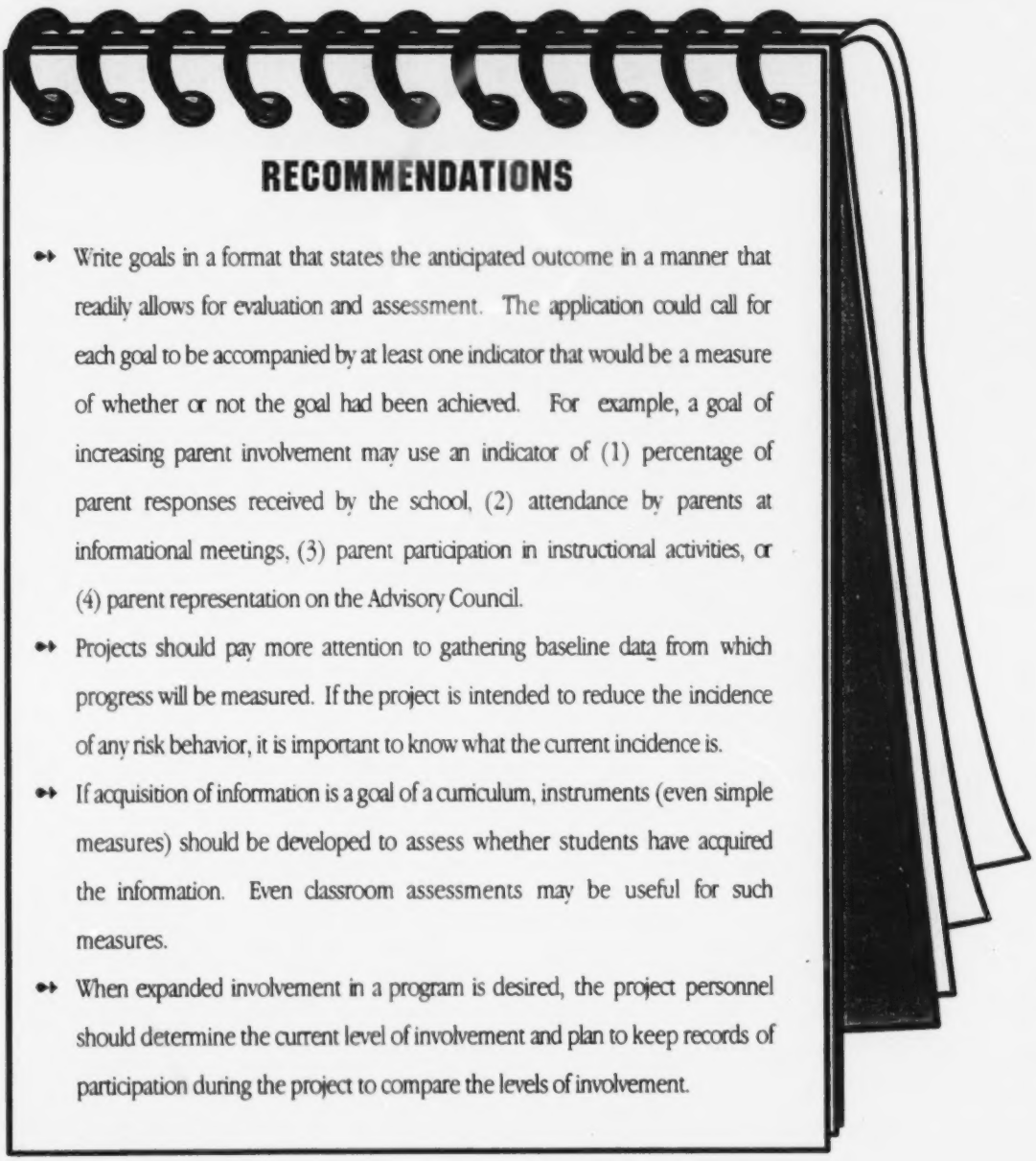
GOALS

It appears that goals for some projects need to be refined. Goals should be specific enough to allow a judgment as to whether the goals have, indeed, been achieved. Many of the goals in these projects are worthy goals but written so generally that it is difficult to assess progress and impact. Applicants don't seem to tie evaluation and goals together. If goals are written well the evaluation process follows very naturally.



RECOMMENDATIONS

- Write goals in a format that states the anticipated outcome in a manner that readily allows for evaluation and assessment. The application could call for each goal to be accompanied by at least one indicator that would be a measure of whether or not the goal had been achieved. For example, a goal of increasing parent involvement may use an indicator of (1) percentage of parent responses received by the school, (2) attendance by parents at informational meetings, (3) parent participation in instructional activities, or (4) parent representation on the Advisory Council.
- Projects should pay more attention to gathering baseline data from which progress will be measured. If the project is intended to reduce the incidence of any risk behavior, it is important to know what the current incidence is.
- If acquisition of information is a goal of a curriculum, instruments (even simple measures) should be developed to assess whether students have acquired the information. Even classroom assessments may be useful for such measures.
- When expanded involvement in a program is desired, the project personnel should determine the current level of involvement and plan to keep records of participation during the project to compare the levels of involvement.

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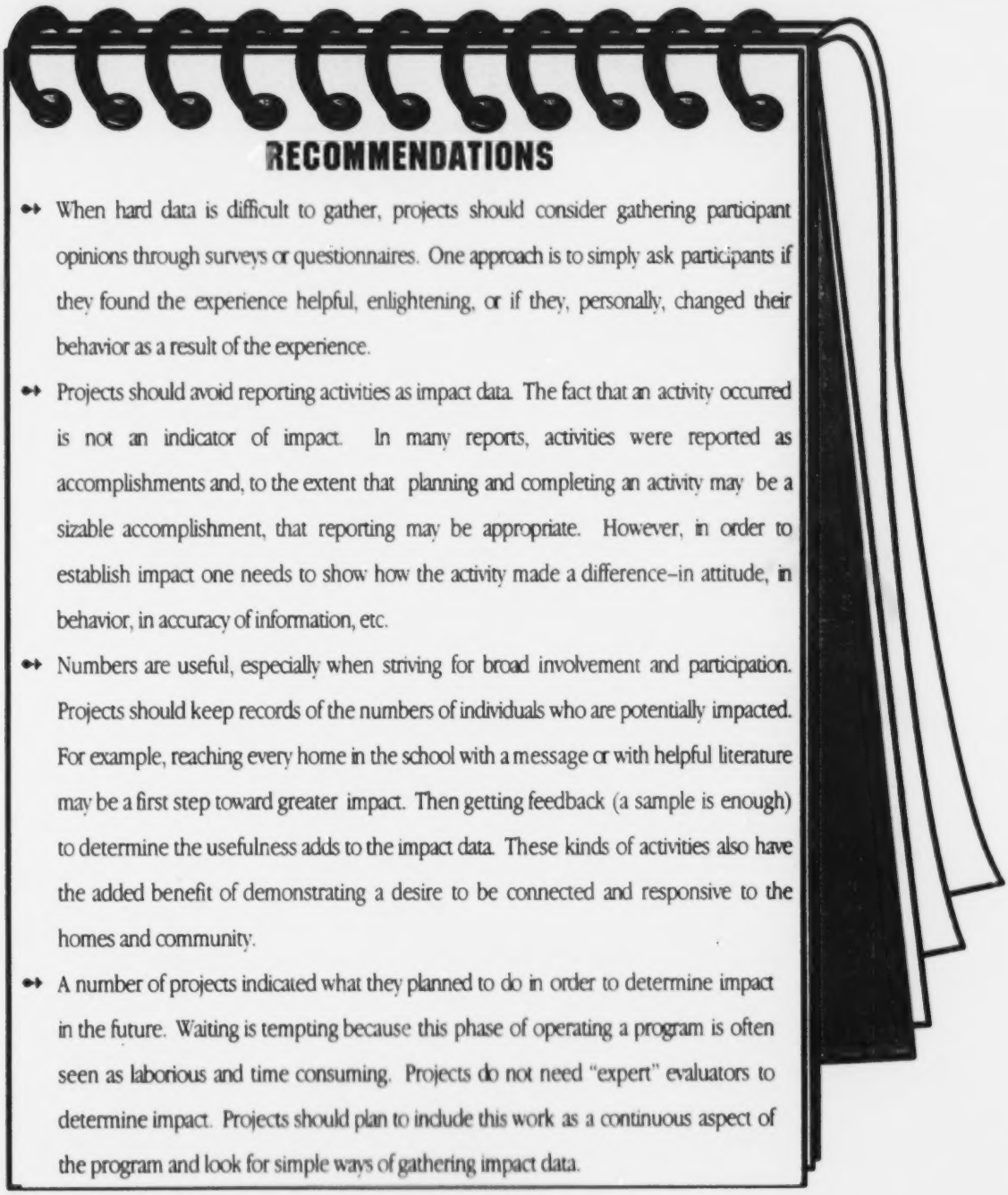
IMPACT

It is imperative that projects be committed to determining the impact of programs. It is important to be able to answer the question, "Did the program, activity, curriculum, make a difference?" Many of the projects gave general observations or informal comments that were intended to suggest impact, however, the evidence is simply not reported in many cases.



RECOMMENDATIONS

- When hard data is difficult to gather, projects should consider gathering participant opinions through surveys or questionnaires. One approach is to simply ask participants if they found the experience helpful, enlightening, or if they, personally, changed their behavior as a result of the experience.
- Projects should avoid reporting activities as impact data. The fact that an activity occurred is not an indicator of impact. In many reports, activities were reported as accomplishments and, to the extent that planning and completing an activity may be a sizable accomplishment, that reporting may be appropriate. However, in order to establish impact one needs to show how the activity made a difference–in attitude, in behavior, in accuracy of information, etc.
- Numbers are useful, especially when striving for broad involvement and participation. Projects should keep records of the numbers of individuals who are potentially impacted. For example, reaching every home in the school with a message or with helpful literature may be a first step toward greater impact. Then getting feedback (a sample is enough) to determine the usefulness adds to the impact data. These kinds of activities also have the added benefit of demonstrating a desire to be connected and responsive to the homes and community.
- A number of projects indicated what they planned to do in order to determine impact in the future. Waiting is tempting because this phase of operating a program is often seen as laborious and time consuming. Projects do not need "expert" evaluators to determine impact. Projects should plan to include this work as a continuous aspect of the program and look for simple ways of gathering impact data.

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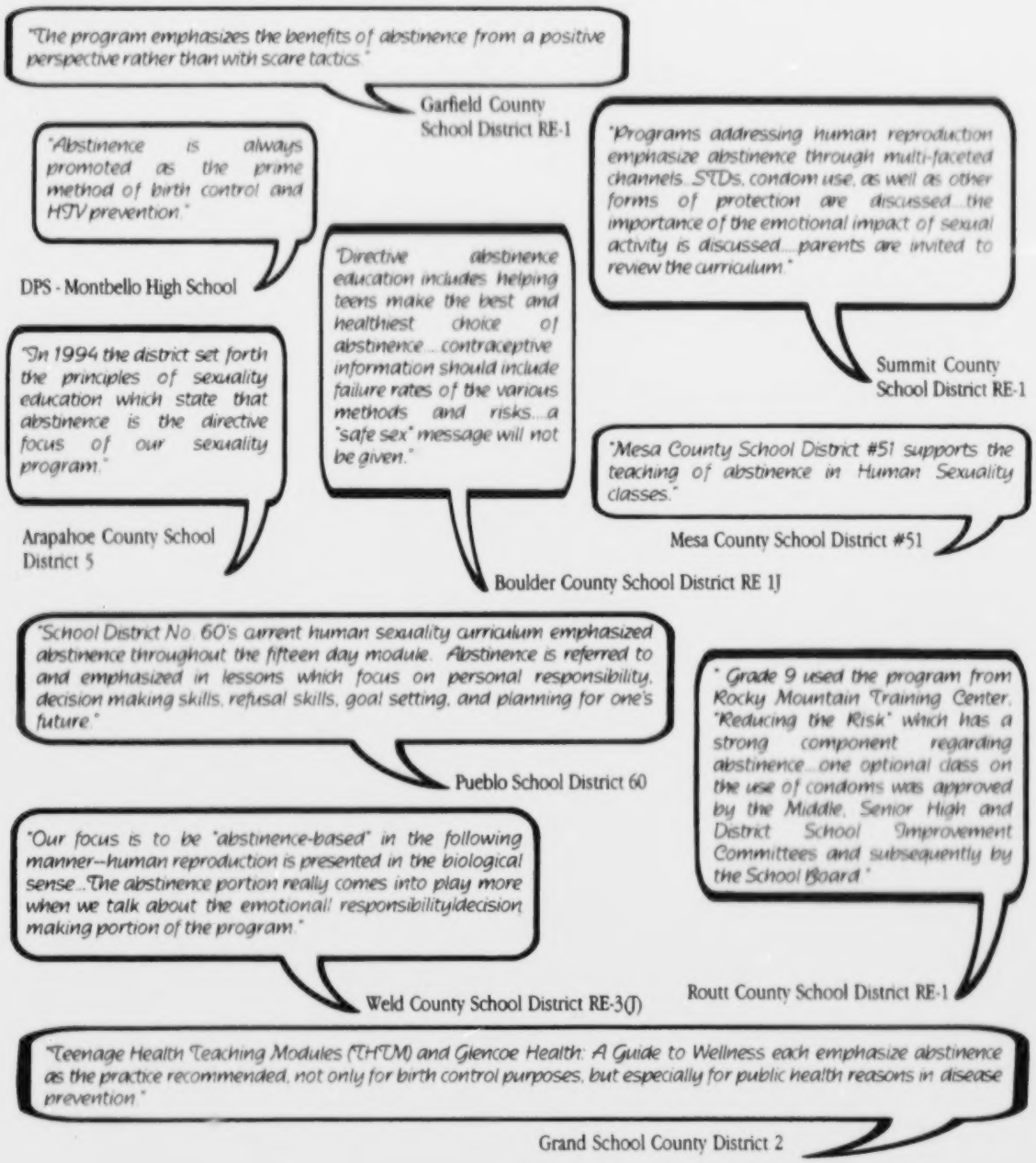
DEALING WITH COMMUNITY CONCERNS

The projects seem to reflect an awareness of community concerns and a genuine attempt to be responsive to those concerns. Sexually oriented topics seem to generate the most concern. The projects seemed to answer questions and adapt programs in order to address the needs of students and parents with a minimum of fuss. The projects consistently emphasized abstinence as a preferred life style for students. Some quotes related to this issue are:


"The program emphasizes the benefits of abstinence from a positive perspective rather than with scare tactics."
Garfield County School District RE-1
"Abstinence is always promoted as the prime method of birth control and HIV prevention."
DPS - Montbello High School
"Directive abstinence education includes helping teens make the best and healthiest choice of abstinence...contraceptive information should include failure rates of the various methods and risks...a "safe sex" message will not be given."
"Programs addressing human reproduction emphasize abstinence through multi-faceted channels...STDs, condom use, as well as other forms of protection are discussed...the importance of the emotional impact of sexual activity is discussed....parents are invited to review the curriculum."
Summit County School District RE-1
"In 1994 the district set forth the principles of sexuality education which state that abstinence is the directive focus of our sexuality program."
Arapahoe County School District 5
"Mesa County School District #51 supports the teaching of abstinence in Human Sexuality classes."
Mesa County School District #51
Boulder County School District RE 1J
"School District No. 60's current human sexuality curriculum emphasized abstinence throughout the fifteen day module. Abstinence is referred to and emphasized in lessons which focus on personal responsibility, decision making skills, refusal skills, goal setting, and planning for one's future."
Pueblo School District 60
"Our focus is to be "abstinence-based" in the following manner--human reproduction is presented in the biological sense...The abstinence portion really comes into play more when we talk about the emotional/ responsibility/decision making portion of the program."
Weld County School District RE-3(J)
" Grade 9 used the program from Rocky Mountain Training Center, "Reducing the Risk" which has a strong component regarding abstinence...one optional class on the use of condoms was approved by the Middle, Senior High and District School Improvement Committees and subsequently by the School Board."
Routt County School District RE-1
"Teenage Health Teaching Modules (THTM) and Glencoe Health: A Guide to Wellness each emphasize abstinence as the practice recommended, not only for birth control purposes, but especially for public health reasons in disease prevention."
Grand School County District 2

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The number of requests for exemptions would seem to be an indicator of the level of concern/acceptance experienced by the various projects. The following chart shows the number of students whose parents or guardians requested exemption from the unit dealing with reproduction and the number requesting exemption from the entire health program.

REPORTED EXEMPTIONS		
District/School	Reproduction Unit	Entire Program
Arapahoe County School District 5	"1 or 2 per middle school 0 in high school"	
Boulder County School District RE-1J	"less than 10"	0
Douglas County School District RE-1	3	0
DPS - Montbello High School	"very few"	
Garfield County School District RE-1	7	0
Grand County School District 2	12	5
Hayden School District RE-1	0	0
Mesa County School District #51	"few"	0
Pueblo County School District 60	6	1
Rio Grande County School District C-8	13	
Summit County School District RE-1	0	0
Weld County School District RE-3(J)	0	

COLLABORATION

The development of Comprehensive Health Programs seems to be a natural for connecting many agencies, organizations, and individuals within the school community. The health curriculum and related activities seem to call forth strong values, commitment and concern from people. The projects in this report have been exemplary in their attention to involving the community in their advisory committees and in the delivery of their programs. There is obvious movement away from the early days of advisory councils where small groups came together to hear reports and approve (sometimes "rubber stamp") future action. The advisory groups for these projects seem to be intimately involved in determining the needs of the community and in making decisions about direction for the projects and ways to achieve the goals. These groups have also provided a forum for people to have their concerns heard and addressed.

A review of the collaboration reported by the projects indicates the broad range of people and organizations who are contributing time, materials, equipment, and expertise to comprehensive health education. While the primary focus has been on students, a number of projects have addressed issues of parents and other adults in the community. A significant by-product of this collaboration has been the increased integration of health programs and services in the community resulting in eliminating gaps in services and reducing unnecessary duplication of services. Health agencies, health professionals, community organizations, law enforcement, community leaders, parents and educators have come together to answer the question, "How can we address the health needs of our students and communities within a framework that reflects the values and concerns of our community?" These projects demonstrate that such an important, yet difficult, task is being accomplished all over the State of Colorado.

The following quotes reflect the nature of advisory groups in these projects:

"The advisory committee's purpose is threefold --

(1) to serve as a coordination link concerning services that are provided in health education by community agencies;

(2) to monitor the health of our students by surveys, listening to staff, students, parents, professionals, etc.; and

(3) to initiate/write a strong K-12 Comprehensive Health Program and then support it with staff training."

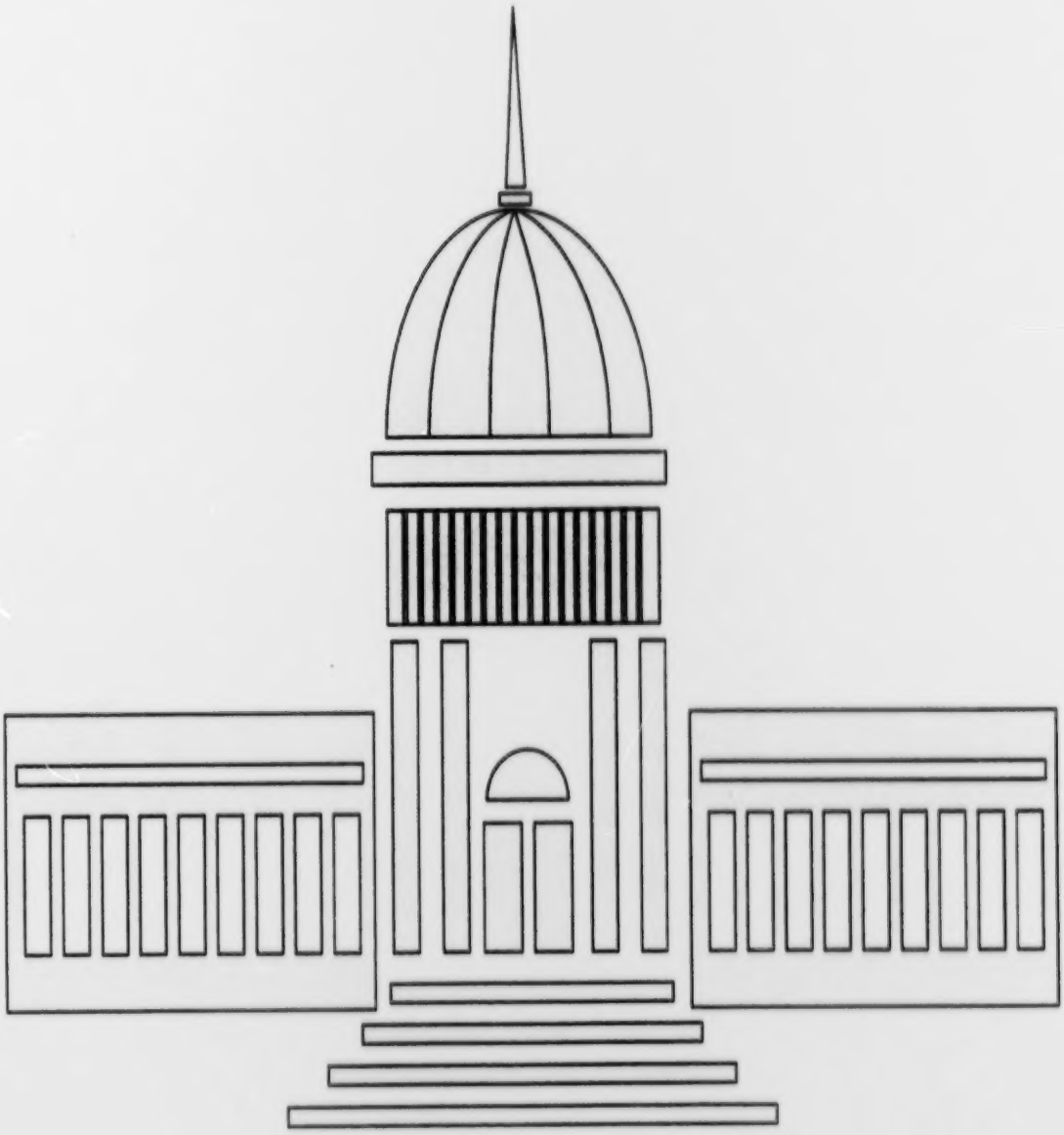
-- Durango Schools

"The Comprehensive Health Advisory Committee became more than a funding approval and allocation group. We have a core group that represents students, staff, community professionals and parents that meets on a regular basis. Members have attended conferences, enlisted community businesses to promote our efforts toward community-wide "wellness."

-- Weld County School District RE-3(J)

STATE LEVEL ACCOMPLISHMENTS

The Department of Education carried out a number of activities in support of local planning and implementation efforts for Comprehensive Health Education.



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TECHNICAL ASSISTANCE

The Comprehensive Health Education Initiative respond to approximately 1,200 telephone calls related to Comprehensive Health Education.

A "Frequently Asked Questions" document was developed as one response to the telephone requests.

PROFESSIONAL DEVELOPMENT

Forty leaders from local health advisory committees attended training on facilitation skills for community teams.

A Fall and Spring meeting was held for representative teams from the funded programs. Over 120 persons attended. Topics included the role of prevention in health education, valuing diversity in team development, and a role play in implementing a comprehensive health education program in a school district.

MEETINGS AND CONFERENCES

Collaboration between related initiatives served to strengthen the technical assistance and professional development available to the funded projects. Examples of state involvement in related initiatives are:

Colorado Coalition for the Protection of Children
Co-sponsored the annual Prevention Partners conference on "Increasing Personal Strengths and Reducing Risks in Colorado"

Colorado Organization on Adolescent Pregnancy, Parenting and Prevention
Co-sponsored annual conference on "Male Involvement"

Colorado School Health Council
Co-sponsored the annual Mountainside Conference on "Asset Building for Colorado's Youth"

Friends First
Sponsored a luncheon to host their guests from "The Art of Loving Well" program

Metropolitan Denver Provide Network
Co-sponsored Teen Pregnancy Prevention Statewide Media Campaign, "Family Connections", targeted to Parents

University of Northern Colorado
Co-sponsored summer institute for teachers on "Child Abuse and Violence Prevention"

STATE STUDENT ADVISORY BOARD

Students from all across Colorado attended the Fall and Spring meetings for the funded projects. Over fifty students provided ideas on how to improve their local comprehensive health education programs.

LAW RELATED EDUCATION STATE ADVISORY BOARD

The State Law-Related Education Advisory Board developed the *Recommended Guidelines for the Implementation of Effective Law-Related Education Programs.* The guidelines will be presented to the State Board of Education in August, 1996 and are pending the State Board's approval.

Professional development was provided through workshops at the annual State Law Conference, the annual state Mountainside Conference, and at a meeting of the State *Safe and Drug-Free Schools and Communities* Advisory Board.

The State LRE Advisory Board continues to meet regularly to further develop recommendations for training and assessment. Available resources have been identified to assist schools in accessing current information and additional technical assistance.

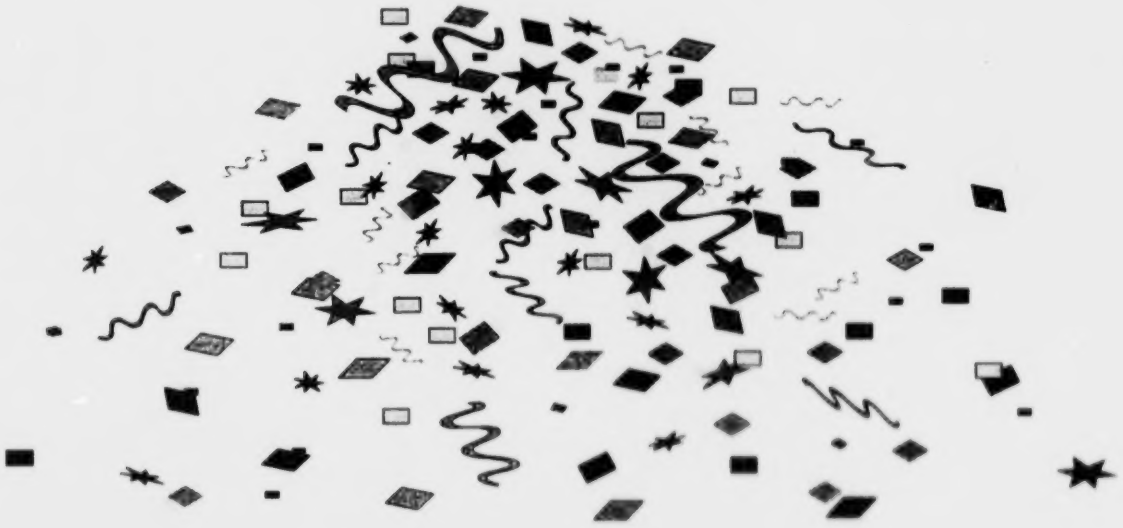
STATE BOARD OF EDUCATION HEALTH EDUCATION TASK FORCE

In April, the State Board of Education created a task force to "examine all materials, curriculum aides, programs of instruction, training materials and programs, and all other activities and materials engaged in and/or disseminated by the Colorado Department of Education" and make recommendations "as they relate to the Board's guidelines in relation to the Comprehensive Health Education Act".

BUDGET

A total of $505,062 was available through the Comprehensive Health Education Act. This funding is separated into two account; one entirely for distribution and one for distribution and program administration.

ONE FINAL NOTE



Congratulations are extended to the project directors and others who have expended much time and effort in accomplishing the purposes of these projects. In most cases, the project management is in addition to a schedule and work load that is already full. Hopefully, this report can serve to acknowledge and appreciate those people and their work on behalf of Colorado's youth.

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